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CONFIRMATION NO. 9510

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**** CONTINUING DATA *******

This appln claims benefit of 60/239,490 10/11/2000

**** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

11/14/2001

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		PA	0	54	6
Verified and Acknowledged	/BLESSING M FUBARA/ Examiner's Signature	Initials				

ADDRESS

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TITLE

Compositions comprising modafinil compounds

FILING FEE RECEIVED 2968	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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